



8TH ANNUAL FOUNTAIN COMMUNITY FAIR

Saturday, August 26, 2017

12PM – 4PM

Du Val High School

9880 Good Luck Road, Lanham, MD 20706

Let Us Impact Our Community Together!

Fountain Community Enrichment, Inc. invites you to participate at the **8th Annual Fountain Community Fair!** With your participation, the fair provides support services and resources for Prince George's County residents and neighboring cities through free food, fresh produce, free clothing, shoes, health screenings, housing acquisition and preservation, enrollment services for healthcare coverage, pro-bono attorneys, employment assistance, educational opportunities, and much more.

The fair will take place on **Saturday, August 26, 2017 from 12 pm to 4 pm** at **Du Val High School, 9880 Good Luck Road, Lanham, Maryland 20706. *More than 1,500 individuals attended last year's community fair.*** This is an excellent opportunity for you to advertise your organization while impacting their lives with your services. Our event will be promoted through radio, online via our website, community calendars, as well as flyers and weekly promotional materials.

Space is limited, please complete the participation form below and reserve your space today!

Thank you,

Fountain Community Enrichment, Inc.

GENERAL QUESTIONS:

Rebecca Odukoya
Director of Operations
Fountain Community Enrichment, Inc.
15853 Commerce Court,
Upper Marlboro, MD 20774

Tel: (240) 334-2000
Fax: (301) 769-5783

Jade Vaughn
Event Coordinator
Fountain Community Enrichment, Inc.
15853 Commerce Court
Upper Marlboro, MD 20774

Tel: (240) 696-2086
Fax: (301) 769-5783

Email: info@FountainEnrichment.org
Web: www.FountainEnrichment.org

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BOOTH RESERVATION FORM

To reserve a booth for the 8th Annual Fountain Community Fair, please complete this form and email, fax or mail to:

ATTN: COMMUNITY FAIR REGISTRATION

Fountain Community Enrichment, Inc.

15853 Commerce Court

Upper Marlboro, Maryland 20774

Fax: (301) 769-5783 **Tel:** (240) 696-2086 **Email:** info@FountainEnrichment.org

CONTACT INFORMATION

Contact Name:

Company Name:

Street:

City:

State:

Zip Code:

Tel:

Cel:

Fax:

Email:

Website:

REPRESENTATIVES ATTENDING

1)

4)

2)

5)

3)

6)

Organization's Name: _____

How would you impact the community?

What free services would you be providing to our community members? Please indicate below:

- | | |
|--|--|
| <input type="checkbox"/> AIDS/HIV/Other STDs testing | <input type="checkbox"/> Heart disease & stroke prevention |
| <input type="checkbox"/> Banking/Financial Services | <input type="checkbox"/> Housing counseling/mortgage lenders |
| <input type="checkbox"/> Blood pressure/pulse/pulse oximetry | <input type="checkbox"/> Lipid profiles and glucose testing |
| <input type="checkbox"/> Counseling services | <input type="checkbox"/> Mammograms/Digital mammograms |
| <input type="checkbox"/> Dental Services | <input type="checkbox"/> Medical Insurance coverage |
| <input type="checkbox"/> Drug/Alcohol abuse resources | <input type="checkbox"/> Nutrition counseling |
| <input type="checkbox"/> Employment/Educational opportunities | <input type="checkbox"/> Preventive dental consultation |
| <input type="checkbox"/> Eye/Glaucoma screening | <input type="checkbox"/> Preventive medical consultation |
| <input type="checkbox"/> Financial services | <input type="checkbox"/> Prostate cancer screening |
| <input type="checkbox"/> Fitness tests including body fat analysis | <input type="checkbox"/> Pro-bono attorneys |
| <input type="checkbox"/> Flu/Other vaccination | <input type="checkbox"/> Vein/Foot screenings |
| <input type="checkbox"/> Free vaccinations/flu shots | <input type="checkbox"/> Other (please specify below) |
| <input type="checkbox"/> Hearing testing/Services | _____ |

Can you provide any of the following items to prepare "**THANK YOU BAGS**" for up to 50 volunteers? **ANY DONATION WOULD BE GREATLY APPRECIATED**

- | | | | | |
|---|--|--------------------------------------|--|----------------------------------|
| <input type="checkbox"/> T-shirts | <input type="checkbox"/> Pens, Pencils, Highlighters | <input type="checkbox"/> Key chains | <input type="checkbox"/> Bags/Tote/Lunch | |
| <input type="checkbox"/> Mugs | <input type="checkbox"/> Cups | <input type="checkbox"/> Calculators | <input type="checkbox"/> Stationery | <input type="checkbox"/> Magnets |
| <input type="checkbox"/> Other, please specify: _____ | | | | |

Would your agency be able to donate door-prize/grand prize to the fair? Yes _____ No _____

If yes, please indicate type of door-prize/grand prize your organization will donate:

MAIL - FAX – EMAIL US YOUR BOOTH REGISTRATION FORM

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please complete this form and mail, fax or email to:

ATTN: COMMUNITY FAIR REGISTRATION

Fountain Community Enrichment, Inc.

15853 Commerce Court

Upper Marlboro, Maryland 20774

Fax: (301) 769-5783 **Tel:** (240) 696-2086 **Email:** info@FountainEnrichment.org

PLEASE ONLY SEND PAGES 2 & 3

**Forms must be received no later than
Friday, July 21st 2017**

We look forward to your participation at the
8th Annual Fountain Community Fair

**You will receive additional details
two weeks prior to the event date**